A meeting of the New Jersey State Board of Medical Examiners was held on Wednesday, October 8, 2014, at the Richard J. Hughes Justice Complex, 25 Market Street, 4<sup>th</sup> Floor Conference Center, Trenton, New Jersey. The meeting was called to order by President Stewart Berkowitz, M.D.

#### **PRESENT**

Board Members Angrist, Stewart Berkowitz, Cheema, Criss, DeLuca, Kubiel, Lopez, Maffei, McGrath, Metzger, Miksad, Miller, Parikh, Rao, Rock, Scott and Shah.

#### **EXCUSED**

Board Members Steven Berkowitz and DeGregorio

### **ABSENT**

### **ALSO PRESENT**

Assistant Attorney General Joyce, Senior Deputy Attorneys General Dick, Flanzman, and Gelber; Deputy Attorneys Hafner and Puteska; William V. Roeder, Executive Director of the Medical Board, Dr. Harry Lessig, M.D., Consultant Medical Director.

### STATEMENT CONCERNING THE ANNUAL NOTICE OF PUBLIC MEETINGS

The requirements of the "Open Public Meetings Act" were satisfied by notice of this meeting given in the annual notice adopted by the New Jersey State Board of Medical Examiners on August 14, 2013 which was transmitted to the ATLANTIC CITY PRESS, STAR LEDGER, CAMDEN COURIER POST, ASBURY PARK PRESS, BERGEN RECORD and the TRENTON TIMES, all on the 24<sup>th</sup> day of September 2013.

#### **ANNOUNCEMENTS**

It was noted that the meeting in July 2015 is on July 8<sup>th</sup>, not the 9<sup>th</sup>. It further was noted that the meeting is September would be September 2<sup>nd</sup>.

### **MINUTES**

THE BOARD, UPON MOTION MADE AND SECONDED, VOTED TO APPROVE THE AUGUST 13, 2014 OPEN BOARD MINUTES.

The Motion, made by Dr. Cheema and seconded by Dr. Metzger, carried unanimously.

THE BOARD, UPON MOTION MADE AND SECONDED, VOTED TO APPROVE THE SEPTEMBER 10, 2014 OPEN BOARD MINUTES WITH THE CORRECTED DATE OF JULY 8, 2015.

The Motion was made by Ms. Lopez and seconded by Dr. Angrist. It carried unanimously.

THE BOARD, UPON, MOTION MADE AND SECONDED, VOTED TO APPROVE THE JUNE 17, 2014 PHYSICIAN ASSISTANT ADVISORY COMMITTEE OPEN MINUTES.

The Motion carried unanimously. It was made by Ms. Criss and seconded by Dr. Shah.

#### **NEW BUSINESS**

#### Legislation

**A3712** - Seeks to require health care practitioners to inform patients of addiction potential of controlled dangerous substances prior to issuing prescription.

**\$2366** - Seeks to require health care practitioners to inform patients of addiction potential of controlled dangerous substances prior to issuing prescription.

THE BOARD SUPPORTED THE CONCEPT OF THE PROPOSED PIECES OF LEGISLATION BUT QUESTIONED THEIR NECESSITY AS IT BELIEVED THAT THIS IS THE STANDARD OF CARE THAT PRACTITIONERS CURRENTLY PRACTICE WHEN WRITING SUCH PRESCRIPTIONS. THE NATURE OF THE INFORMATION PRESENTED SHOULD BE WITHIN THE DISCRETION OF THE PRACTITIONER WHO IS IN THE BEST POSITION TO ASSESS THE INFORMATION TO BE PRESENTED.

The Motion was made by Dr. Angrist and seconded by Ms. Lopez. It carried unanimously.

**\$2378** - Seeks to extend the "Overdose Prevention Act" immunity provisions to certain professionals and professional entities, and requires needle exchange programs to obtain standing order for opioid antidote dispensation, appropriates \$500,000.

THE BOARD, UPON MOTION MADE AND SECONDED,

SUPPORTED THE CONCEPT BUT QUESTIONED THE NECESSITY AS STANDING ORDERS FOR THE SYRINGE EXCHANGE SITES ARE ALREADY IN PLACE. THIS LEGISLATION WOULD SIMPLY CODIFY WHAT IS ALREADY IN PLACE.

The Motion was made by Ms.Lopez and seconded by Ms. Criss. It carried unanimously with one recusal from Ms. Miller.

**A3737** - Seeks to require insurers to provide minimum of 30 days' inpatient treatment for substance abuse when a physician determines treatment is medically necessary.

WHILE THE BOARD SUPPORTED THE CONCEPT OF HAVING THE SERVICES AVAILABLE AND IT WAS AWARE OF THE CONSEQUENCES WHEN SUCH TREATMENT IS DENIED, IT REMAINED CONCERNED ABOUT THE IMPACT ON THE COST OF MEDICAL INSURANCE COVERAGE FOR BOTH THE INSURED AND UN INSURED. AS WRITTEN, IT BELIEVED THERE WOULD BE SIGNIFICANT RAMIFICATIONS IF THE BILL WERE PASSED WITHOUT FURTHER STUDY OF THE IMPACTS. THE BOARD, UPON MOTION MADE AND SECONDED, VOTED TO PROPOSE THAT THE LEGISLATION

BE REFERRED TO DOBI TO CONDUCT A STUDY ON WHAT THE FINANCIAL IMPACT WOULD BE TO THE INSURED OF THE STATE.

Ms. Criss made the motion with a second from Ms. Miller. It carried unanimously, with Ms. Miksad recused from vote and discussion in the matter.

**A3715** - Seeks to direct poison control and drug information program to establish clearinghouse of drug overdose information, report on trends, and provide education on safe storage and disposal of medications; appropriates \$500,000.

ALTHOUGH THE BOARD QUESTIONED THE NEED FOR A TWENTY-FOUR HOUR NOTIFICATION, UPON MOTION MADE AND SECONDED, IT VOTED TO SUPPORT THE LEGISLATION INASMUCH AS IT RECOGNIZED THAT THE DATA COLLECTION IS IMPORTANT INSOFAR AS IT MAY IDENTIFY CLUSTERS OF AREAS WHERE THERE ARE PROBLEMS WHICH WOULD PERMIT A MORE CONCENTRATED TARGET OF INVESTIGATION.

Ms. Miller recused from discussion and vote in the matter. The motion, made by Dr. Metzger and seconded by Dr. Shah, carried

unanimously.

#### **OLD BUSINESS**

### N.J.A.C. 13:35-7.1, 7.1A and 7.2 - Adoption Notice

The Board proposed amendments to the above noted regulations, "Definitions, Examination of patient's condition required prior to dispensing drugs or issuing a prescription; exceptions; Requirements for issuing written prescriptions for medicines" for notice and comment. The Comment period ended September 5, 2014. Two comments from the following individuals: Melinda R. Martinson, General Counsel, Medical Society of New Jersey and Ryan D. White, MS, MPH, PA-C, Immediate Past President, Chair, Government Affairs Committee, New Jersey State Society of Physician Assistants. Attached for the Board's consideration were responses to the comments received. The Board was requested to approve the proposed responses and publish it in the New Jersey Register as a Final Adoption.

THE BOARD, UPON MOTION MADE AND SECONDED, VOTED TO PUBLISH THE RESPONSES TO THE COMMENTS IN THE NEW JERSEY REGISTER AS A FINAL ADOPTION.

### **INFORMATIONAL**

A recent Federal Drug Enforcement Agency (DEA) Final Rule reschedules hydrocodone combination products (HCPs) from a Schedule III Controlled Dangerous Substance (CDS) to a Schedule II CDS on October 6, 2014. The Drug Control Unit has developed a general guidance document, which is attached, for both practitioners and pharmacies. It outlines the impact and limitations of HCPs when they become a Schedule II CDS on October 6, 2014.

#### **PUBLIC COMMENT**

Mishael Azam from the Medical Society expressed her disappointment in some of the positions taken by the Board on the proposed legislation, specifically noting A3712 and S2366. She noted that the Medical Society, as well as hospice organizations and the cancer society, are opposed to these bills. The Medical Society is seeking to carve out exemptions for hospice and cancer related patients. It is feared that patients will be fearful to taking necessary medications for fear of becoming addicted. She also noted that the Medical Society is working with the drafter to have the 24 hour notification removed. She also is working with DOBI on A3737.

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	Respectfully submitted,	
	Stewart Berkowitz, M.D.	
	Board President	
WVR/br		